

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>GT</i>		2-1-02
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>BB</i>	71473	3-16-00
RESPONSE FORMALITY REVIEW	<i>PB</i>	71473	4-30-00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	3/14/02
1	3/10/02
2	3/10/02
3	3/10/02
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43	N
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49	N
50	N

Claim	Date
Final	
Original	3/14/02
51	3/14/02
52	3/10/02
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89	N
90	✓
91	N
92	N
93	N
94	N
95	N
96	✓
97	✓
98	✓
99	N
100	N

Claim	Date
Final	
Original	3/14/02
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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